



King's Research Portal

Document Version

Publisher's PDF, also known as Version of record

[Link to publication record in King's Research Portal](#)

Citation for published version (APA):

Hussein, S. (2010). Pay in the adult social care in England. *Social Care Workforce Periodical*, (6).
<http://www.kcl.ac.uk/sspp/policy-institute/scwru/pubs/periodical/2010/issue6.aspx>

Citing this paper

Please note that where the full-text provided on King's Research Portal is the Author Accepted Manuscript or Post-Print version this may differ from the final Published version. If citing, it is advised that you check and use the publisher's definitive version for pagination, volume/issue, and date of publication details. And where the final published version is provided on the Research Portal, if citing you are again advised to check the publisher's website for any subsequent corrections.

General rights

Copyright and moral rights for the publications made accessible in the Research Portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognize and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the Research Portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the Research Portal

Take down policy

If you believe that this document breaches copyright please contact librarypure@kcl.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.

ISSN 2047-9638
Issue 6- May 2010

KING'S
College
LONDON

**SOCIAL
CARE
WORKFORCE
RESEARCH
UNIT**

Social Care Workforce Periodical

PAY IN ADULT SOCIAL CARE IN ENGLAND

Shereen Hussein, BSc MSc PhD
May 2010

ISSUE 6
SOCIAL CARE WORKFORCE RESEARCH UNIT
KING'S COLLEGE LONDON
Correspondence: Dr Shereen Hussein
shereen.hussein@kcl.ac.uk

About Social Care Workforce Periodical

The *Social Care Workforce Periodical* (SCWP) is a regular web-based publication, conducted and published by the Social Care Workforce Research Unit, King's College London. SCWP aims to provide timely and up-to-date information on the social care workforce in England. In each issue, one aspect of the workforce is investigated through the analysis of emerging quantitative workforce data to provide evidence-based information that relates specifically to the social care workforce in England. The purpose is to share emerging findings with the social care sector to help improve workforce intelligence. Such updates are useful in highlighting specific issues for further analysis and to inform workforce policy. The first few issues of *Social Care Workforce Periodical* provide in-depth analyses of the latest versions of the National Minimum Data Set in Social Care (NMDS-SC). We welcome suggestions of topics for inclusion in future issues.

About the author

Shereen Hussein is a senior research fellow at the Social Care Workforce Research Unit (SCWRU), King's College London. Shereen holds a Ph.D in statistical demography from the London School of Economics and an MSc in Medical Demography from the London School of Hygiene and Tropical Medicine. Prior to working at the SCWRU she worked with a number of international organisations, including the Population Council and the United Nations. Her current research interests include modelling workforce dynamics and profile, safeguarding older people, and migration and long-term care.

For further information on SCWP please contact Dr Shereen Hussein; email: shereen.hussein@kcl.ac.uk; phone: + (44) (0) 207 848 1669.

Acknowledgments

The author is most grateful to Skills for Care for providing the latest NMDS-SC data files. Particular thanks are due to David Griffiths, Christine Eborall and William Fenton for their support and assistance, and to colleagues at the Social Care Workforce Research Unit. This work is funded under the Department of Health Policy Research Programme support for the Social Care Workforce Research Unit at King's College London. The views expressed in this report are those of the author alone and should not necessarily be interpreted as those of the Department of Health or Skills for Care.

Introduction

Pay in the care sector forms a cornerstone of debates about social care and many researchers have argued that continued low pay has contributed to the care sector's position within the secondary labour market. While the support provided by care workers is essential for society, the sector's work conditions and pay may render it unattractive to different groups of potential workers. Consequently, the care sector has attracted groups who may be willing to accept such conditions in the hope of other rewards. For example, migrants may be motivated primarily by the desire to move to the UK, rather than any motivation to work in the care sector itself (Hussein et al., 2010), while women with young children may find the care sector provides flexible work arrangements and can be a starting point in their return to the labour market.

Moreover, even among jobs in sectors where traditionally low pay is evident, such as health and education (Robinson et al., 1997), studies making use of longitudinal data have found that levels of pay in social care work are lower than in similar sectors, after controlling for education and employment experience (England et al., 2002). This characteristic of low pay in care work is not unique to the UK and is observed in other developed countries such as Australia and Canada (Anderson and Hughes, 2009; Palmer and Eveline, 2010).

Britain's first National Minimum Wage (NMW) came into force in April 1999, covering some 5 percent of workers, and was originally set at £3.60 per hour (£3 per hour for 18-21 year-olds). Since 1999 the NMW has risen in line with the growth in average earnings (Metcalf, 2004) to reach, in 2009, £5.73 for adults; £4.77 for 18-21 and £3.53 for 16-17 year-olds. The NMW effect was most pronounced within the care sector (Dickens and Manning, 2002), which is considered to be the lowest paying sector in the UK, particularly for workers in care homes (Metcalf, 2004). Prior to the introduction of NMW, around 40 percent of workers in care homes were receiving less than £3.60 per hour, with a 'big bang', rather than gradual, significant spike in pay distribution of £3.60 in April 1999 (Dickens and Manning, 2002). However, further results from analysis of pay levels in care homes have identified no 'spillover' effect of the NMW, meaning that most pay has stayed on or near the NMW.

Last year, 2009, was the 10th anniversary of the NMW and prompted an evaluation of the impact of the NMW on the general labour market, as well as specific job groups, by the Low Pay Commission. The report found that minimum wage jobs are more likely to be held by women, young people, those of retirement age, ethnic minorities, those with disabilities and those with no qualifications (Low Pay Commission, 2009). Moreover, the report indicated that NMW was more prevalent within small firms and in the private sector. The social care sector has been always one of the sectors where minimum wages, or below, are widely used; and this evaluation found that since 2007 there has been a rise in the use of the minimum wage in social care.

Here, in this report, we use the NMDS-SC pay data provided by employers who completed the National Minimum Data Set for Social Care (NMDS-SC) database up until the end of 2009 to investigate up-to-date and detailed information on pay levels in the adult care sector. This dataset contains two main databases, both provided by social care employers in England. By the end of December 2009, the NMDS-SC had been completed by 27,019 employers, providing information on 438,973 workers. NMDS-SC returns mostly cover adult social care in England but they are also completed by small proportions of children's services and health providers. In this report our focus is on 'adult' care therefore we used only those records related to providers in the adult care sector. In addition, some duplication of records was evident since local authority employers were advised by Skills for Care to consider each 'team' as a separate 'establishment'; therefore some workers working for two or more teams were multiply counted within the NMDS-SC workers' data set. To reduce this problem, multiple records were identified and only one record for each worker has been used. Additionally, the data set contained individual workers' records with 'extreme' ages: as a first quality check step, we only included workers with ages in the range of 16 to 75 years. This process resulted in a total of 348,948 unique individual workers' records.

To achieve the best possible accuracy in pay data, a number of additional measures were taken; further to selecting all unique individual workers' records, we only analysed pay data that had been updated during the past 12 months (prior to December 2009). Hourly rates were calculated for all workers whose employers provided information on their pay rates (whether hourly or annually) and their contracted hours, after a number of quality control steps. The first step was to eliminate extreme outliers, where outliers were calculated in relation to the median¹ and quartiles of pay among different job roles in different regions. Thus, we allowed for high or low figures proportionate to corresponding jobs and sector but excluded those with extremely high or low values subject to the distribution of pay among sub-groups of workers. This elaborate data cleaning process was agreed with Skills for Care and conducted prior to any further analysis using pay data. Pay rates were all transformed and calculated on an hourly rate related to the exact contracted hours of workers, to enable comparison of workers performing different job roles and working with various work arrangement patterns. This process resulted in 108,745 adult care workers' records with valid and up-to-date pay information.

The purpose of this current pay analysis is to provide in-depth information on different pay scales for different jobs performed within the care sector in England. Trends of pay during last year's rolling quartiles are explored and variations in pay level in relation to different macro and micro level characteristics are examined. Regional, sector and size of establishment are well-documented factors related to wages on the macro level while gender and ethnicity are thought to be important factors on the individual level. For example, there are well documented gender biases and gaps in both the

¹ Median is preferred to mean as it is not sensitive to extreme values and may reflect the true 'middle' hourly rate better than the mean.

distribution of the whole care sector, as well as certain job roles; such as management, where men are proportionally over-represented (Hussein, 2009a and 2009b).

Pay by main job role

Table 1 presents hourly pay rate statistics for different job roles among workers where pay data had been updated during 2009 and were considered to be accurate after the data cleaning process. The results show that the highest median hourly rates are received by social workers and occupational therapists at £15.40 and £15.08 per hour respectively. Hourly rates were very close among registered managers and other allied health professionals, at a median rate of £13.46 and £13.35. The median hourly rate for senior care workers is far lower, at £7.00, and for care workers it is £6.45, which is just 45 pence higher than that among ancillary staff, such as cooks and cleaners.

Table 1 Mean and median hourly pay rate for different job roles in the English care sector during 2009, NMDS-SC Dec 2009

Main job role	Number of workers	Hourly pay rate		
		Median	Mean	Standard deviation
Social Worker	924	15.40	15.02	2.37
Occupational Therapist	212	15.08	14.63	2.72
Registered Manager	1326	13.46	13.33	3.16
Allied Health Professional	48	13.35	13.42	3.10
First Line Manager	1534	12.65	13.11	4.06
Middle Management	702	11.60	12.06	4.39
Registered Nurse	6727	11.50	11.54	0.91
Senior Management	365	11.00	11.52	4.09
Managers not care-providing roles	1008	9.84	10.70	4.41
Supervisor	1437	9.55	10.13	3.11
Employment Support	75	8.00	8.46	2.60
Administrative or office staff	2296	7.93	8.08	1.65
Community Support	2549	7.49	8.19	2.12
Senior Care Worker	6778	7.00	7.28	1.43
Technician	462	6.50	6.69	1.07
Care Worker	65906	6.45	6.69	1.11
Other non-care-providing job roles	1724	6.34	6.72	1.30
Ancillary staff not care-providing	9988	6.00	6.38	1.06
Other care-providing job role	4557	5.67	6.09	0.95

Table 2 provides hourly pay statistics among different groups of job roles,² data clearly showing that the highest median hourly rate among both professional

² Grouped as: 1. 'Managers/supervisors': senior management, middle management, first line manager, register manager, supervisor, managers and staff in care-related jobs; 2. 'Direct care': senior care worker, care worker, community support, employment support, advice and advocacy, educational support, technician, other jobs directly involving care; 3. 'Professional': social workers, occupational therapists, registered nurse, allied health professional, qualified teacher; 4. 'Other': administrative staff, ancillary staff, and other job roles not directly involving care.

staff and managers/supervisors at £11.57 and £11.63 respectively. However, the larger standard deviation (SD) among manager/supervisors (SD=4.01 vs. 1.75 among professional staff) indicates that many are paid less than professional staff but perhaps a minority is paid well above. Direct care workers' hourly pay rates, median and mean, are almost identical to that of other staff, such as cleaners and cooks with similar standard deviations.

Table 2 Hourly pay rate statistics among different job role groups during 2009, NMDS-SC Dec 2009

Main job role group	Number of workers	Hourly pay rate		
		Median	Mean	Standard Deviation
Manager/Supervisor	6372	11.63	11.90	4.01
Professional	7913	11.57	12.04	1.75
Direct Care	80441	6.47	6.76	1.23
Other	14019	6.23	6.70	1.36

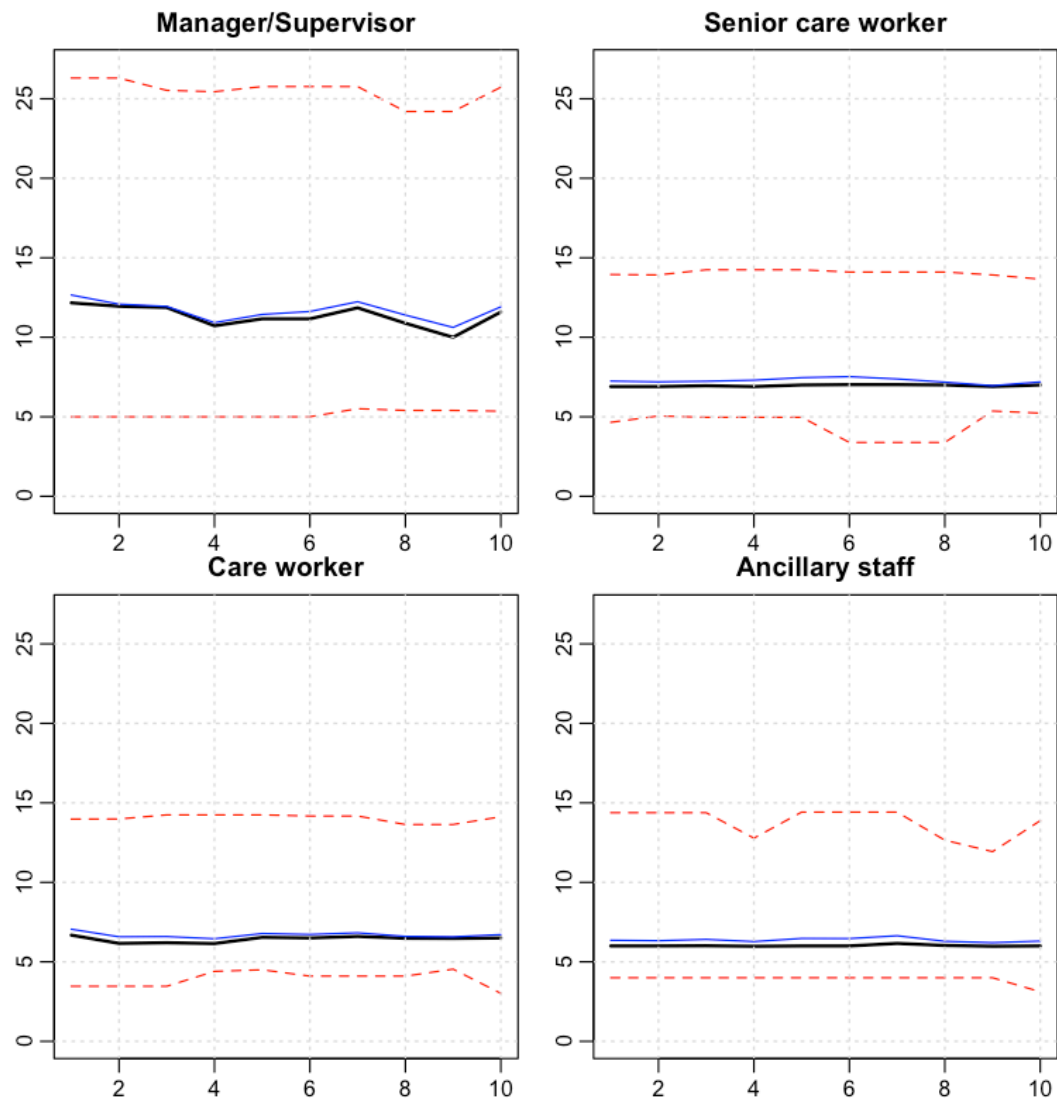
The analysis indicates a gap between two distinctive groups of workers in the adult care sector: the 'skilled' or more qualified group represented in the professional job roles (social workers, nurses and occupational therapists) as well as managers and supervisors; and the 'less qualified' group represented by direct care workers (including senior and care workers) and other workers (including administrators and ancillary staff). The average pay gap between the two groups ranges from £5.10 to £5.40 per hour. It is clear that within the care sector there exist two labour market positions, one with relatively attractive pay conditions for professional and managerial roles and the other with a less favourable or secondary position where direct care providing staff, cleaners and others stand on a similar footing in terms of pay.

Recent pay trends

Using NMDS-SC we calculated rolling quarterly hourly pay rates' median and other statistics for different groups of workers. Rolling quarterly rates calculate statistics over moving three months worth of data starting from January 2009-March 2009 up to October 2009-December 2009. Using this method increases the accuracy of the calculations as they produce sufficiently numerous records and should not reflect monthly variations in inputs; for example, if a certain month is preferred by employers to complete the NMDS-SC returns. Moving quartiles distil and smooth the trend from the monthly pay fluctuations. We focus here on the group of managers and supervisors, as defined earlier, and the three single job roles of 'senior care workers', 'care workers' and 'ancillary staff'. Figure 1 and Table 3 present these trends for different job roles.

Figure 1 clearly shows that hourly rates among the manager/supervisor job group are higher than the three other job roles but also wider in their distribution. This indicates a wide range of hourly pay rates, ranging from just above £5.72 to over £25.53 an hour. Figure 1 also shows that hourly pay rates for care workers are slightly higher but very much similar to those among ancillary non-care providing workers, in terms of their distributions when considering minimum and maximum hourly pay rates. Examining hourly rate trends during 2009, both Figure 1 and Table 3 show that in across England pay rates remained almost stable for all quarters. Perhaps a 'slight' decline is observed in the average pay for manager/supervisor, which declined from £12.16 during the first quarter of 2009 to £11.59 during the last quarter of 2009. The median hourly rate for senior care workers and care workers did not change much over the year.

Figure 1 Rolling median, and other statistics, of hourly pay rates for managers/supervisors, senior care workers, care workers and ancillary staff in adult care sector in 'all' England, NMDS-SC Dec 2009



Dashed red lines present max and min hourly rates; black line presents the median and blue line is mean hourly rate. X-axis presents the rolling period from January 2009 to December 2010 as detailed in Table 3 and Y-axis presents the hourly pay rate in GBP

Table 3 Rolling quartile mean and median hourly pay rates from January to December 2009 for different groups of workers in all England according to main job role, NMDS-SC Dec 2009

Rolling quartile	Manager/supervisor‡					Senior care Worker					Care worker					Ancillary staff				
	Max	Median	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N
Jan-Mar 09	26.30	12.16	12.66	5.00	1488	13.95	6.90	7.24	4.65	1499	13.98	6.68	7.05	3.46	9977	14.38	6.00	6.36	4.00	1630
Feb-Apr 09	26.30	11.95	12.08	5.00	1914	13.92	6.90	7.20	5.05	1653	13.99	6.16	6.58	3.46	21548	14.38	6.00	6.33	4.00	2025
Mar-May 09	25.53	11.87	11.94	5.00	1856	14.24	6.95	7.24	4.97	1661	14.24	6.20	6.59	3.46	21732	14.38	6.01	6.41	4.00	1952
Apr- Jun 09	25.44	10.72	10.92	5.00	1675	14.24	6.90	7.30	4.97	1542	14.24	6.15	6.45	4.40	24796	12.78	5.98	6.27	4.00	3418
May- Jul 09	25.77	11.16	11.44	5.00	1423	14.24	7.00	7.46	4.97	1591	14.24	6.54	6.78	4.50	15895	14.42	6.00	6.47	4.00	3615
Jun- Aug 09	25.77	11.16	11.62	5.00	1587	14.10	7.02	7.52	3.39	1838	14.17	6.50	6.72	4.10	16571	14.42	6.00	6.46	4.00	3786
Jul- Sep 09	25.77	11.85	12.24	5.51	1388	14.10	7.02	7.38	3.39	1759	14.17	6.60	6.83	4.10	12845	14.42	6.16	6.64	4.00	2216
Aug- Oct 09	24.20	10.88	11.40	5.40	1169	14.10	7.00	7.18	3.39	1782	13.64	6.48	6.60	4.10	13339	12.65	6.03	6.29	4.00	2125
Sep- Nov 09	24.20	10.00	10.62	5.40	993	13.92	6.90	6.96	5.36	1610	13.64	6.47	6.57	4.54	13564	11.93	5.98	6.21	4.00	2065
Oct- Dec09	25.73	11.59	11.91	5.35	1821	13.66	7.00	7.19	5.23	1978	14.13	6.50	6.71	3.02	18288	13.88	6.00	6.31	3.12	2724

‡ Managers/supervisors are those with any of these jobs as their main job role: senior and middle management, first line managers, registered managers, supervisors and managers of staff in care-related but not care-providing roles.

Table 4 Rolling quartile mean and median hourly pay rates from January to December 2009 for different groups of workers in the 'North' region of England according to main job role, NMDS-SC Dec 2009

Rolling quartile	Manager/supervisor					Senior care Worker					Care worker					Ancillary staff				
	Max	Median	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N
Jan-Mar 09	25.53	11.73	12.29	5.59	452	12.78	7.00	7.62	5.35	370	13.96	6.96	7.52	3.46	2762	14.38	6.00	6.57	4.44	404
Feb-Apr 09	25.53	11.69	11.68	5.60	639	12.78	6.75	7.37	5.05	429	13.96	5.88	6.48	3.46	7884	14.38	5.78	6.26	4.44	606
Mar-May 09	25.53	11.75	11.71	5.62	666	12.78	6.76	7.32	5.05	472	13.96	5.90	6.49	3.46	8090	14.38	5.80	6.28	4.44	601
Apr- Jun 09	19.52	9.00	10.01	5.62	453	11.07	6.50	6.66	5.05	402	12.68	5.85	6.08	4.69	8386	9.62	5.73	6.00	4.00	996
May- Jul 09	24.54	9.67	10.71	5.51	317	13.92	6.50	7.06	5.05	332	12.68	6.20	6.43	4.69	3663	8.67	5.81	6.08	4.00	885
Jun- Aug 09	24.54	11.17	11.90	5.51	566	14.10	6.77	7.58	3.39	532	13.52	6.43	6.53	4.10	5264	8.67	5.92	6.18	4.00	1149
Jul- Sep 09	24.54	12.00	12.42	5.51	519	14.10	6.82	7.66	3.39	531	13.52	6.56	6.74	4.10	4152	8.65	6.20	6.30	4.70	689
Aug- Oct 09	21.86	10.97	11.74	5.40	518	14.10	6.77	7.46	3.39	568	13.52	6.49	6.59	4.10	4926	8.65	6.20	6.30	4.00	755
Sep- Nov 09	21.63	9.30	10.00	5.40	311	13.92	6.70	6.88	5.50	438	13.07	6.40	6.49	4.55	4503	8.65	5.90	6.15	4.00	649
Oct- Dec09	24.91	11.81	11.73	5.40	541	13.66	6.80	7.15	5.60	550	14.13	6.48	6.75	4.55	6271	13.88	6.03	6.38	4.00	1020

Table 5 Rolling quartile mean and median hourly pay rates from January to December 2009 for different groups of workers in the 'Midlands' region of England according to main job role, NMDS-SC Dec 2009

Rolling quartile	Manager/supervisor					Senior care Worker					Care worker					Ancillary staff				
	Max	Median	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N
Jan-Mar 09	26.30	12.16	12.29	5.40	243	13.61	6.70	6.80	5.20	308	13.48	6.54	6.70	4.51	2240	8.62	5.97	6.11	4.00	345
Feb-Apr 09	26.30	11.78	11.86	5.40	374	13.61	6.85	7.03	5.20	432	13.99	6.25	6.55	4.60	4392	12.78	5.96	6.22	4.00	477
Mar-May 09	20.45	10.62	11.02	5.40	300	12.16	6.85	7.12	5.20	473	13.99	6.22	6.52	4.60	4338	12.78	5.90	6.19	4.02	500
Apr- Jun 09	20.45	9.18	10.24	5.00	335	12.16	6.85	7.15	5.20	496	13.99	6.23	6.50	4.60	5207	12.78	5.90	6.17	4.00	829
May- Jul 09	21.22	8.85	9.90	5.00	230	9.32	6.90	7.03	5.20	380	10.48	6.33	6.54	4.77	3221	9.64	5.90	6.13	4.00	719
Jun- Aug 09	21.22	9.02	10.06	5.00	244	9.81	7.08	6.97	5.35	430	10.99	6.24	6.36	4.77	2750	9.25	5.92	6.15	4.00	626
Jul- Sep 09	21.22	10.10	10.73	5.79	213	9.81	7.10	6.98	5.35	391	10.99	6.32	6.42	4.54	2158	9.25	5.96	6.14	4.00	336
Aug- Oct 09	20.19	9.80	10.49	5.90	214	9.88	7.00	6.92	5.50	485	10.99	6.25	6.36	4.54	2642	10.16	5.93	6.13	4.58	492
Sep- Nov 09	20.19	9.74	10.44	5.80	215	9.88	6.80	6.81	5.50	347	12.26	6.25	6.40	4.54	2805	10.16	5.90	6.12	4.50	540
Oct- Dec09	25.73	11.93	12.60	5.35	644	13.04	6.99	7.32	5.23	468	14.11	6.50	6.70	3.02	4252	10.16	6.00	6.21	3.12	764

Table 6 Rolling quartile mean and median hourly pay rates from January to December 2009 for different groups of workers in the 'South' region of England according to main job role, NMDS-SC Dec 2009

Rolling quartile	Manager/supervisor					Senior care Worker					Care worker					Ancillary staff				
	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N	Max	Med	Mean	Min	N
Jan-Mar 09	26.30	12.76	12.98	5.00	793	13.95	6.90	7.24	4.65	821	13.98	6.60	6.95	4.34	4975	10.78	6.08	6.36	4.00	881
Feb-Apr 09	25.44	12.16	12.47	5.00	901	13.92	6.95	7.19	5.20	792	13.98	6.40	6.67	4.34	9272	12.27	6.21	6.43	4.00	942
Mar-May 09	25.44	12.36	12.42	5.00	890	14.24	7.00	7.25	4.97	716	14.24	6.40	6.71	4.34	9304	12.74	6.35	6.64	4.00	851
Apr- Jun 09	25.44	11.87	11.64	5.73	887	14.24	7.05	7.82	4.97	644	14.24	6.40	6.71	4.40	11203	12.74	6.16	6.50	4.00	1593
May- Jul 09	25.77	12.03	12.10	5.73	876	14.24	7.11	7.80	4.97	879	14.24	6.61	7.01	4.50	9011	14.42	6.15	6.77	4.00	2011
Jun- Aug 09	25.77	11.61	11.91	5.73	777	13.07	7.05	7.76	5.50	876	14.17	6.61	6.96	4.50	8557	14.42	6.13	6.72	4.00	2011
Jul- Sep 09	25.77	12.12	12.57	5.74	656	13.07	7.02	7.39	5.36	837	14.17	6.61	7.02	4.68	6535	14.42	6.25	6.98	4.00	1191
Aug- Oct 09	24.20	11.02	11.43	5.74	437	13.07	7.00	7.13	5.36	729	13.64	6.50	6.72	4.68	5771	12.65	6.05	6.38	4.00	878
Sep- Nov 09	24.20	10.78	11.12	5.73	467	11.13	7.00	7.06	5.36	825	13.64	6.52	6.71	4.58	6256	11.93	6.00	6.30	4.00	876
Oct- Dec09	24.20	11.06	11.38	5.46	636	13.07	7.05	7.16	5.50	960	13.64	6.55	6.70	4.58	7765	10.69	6.00	6.30	4.00	940

Pay Trends by Region

Some UK regional variations in pay are documented in the literature, where the prevalence of the NMW is least prevalent in the South of England. The Low Pay Commission (2009) analysis shows that the proportion of NMW jobs (which pay at or below the NMW at the time) in the South of England and London is lower than the national average, and that such regional variations have changed little since the introduction of the NMW in 1999. The LPC also found that the highest prevalence of the NMW is observed among women in the North East of England and the Midlands region.

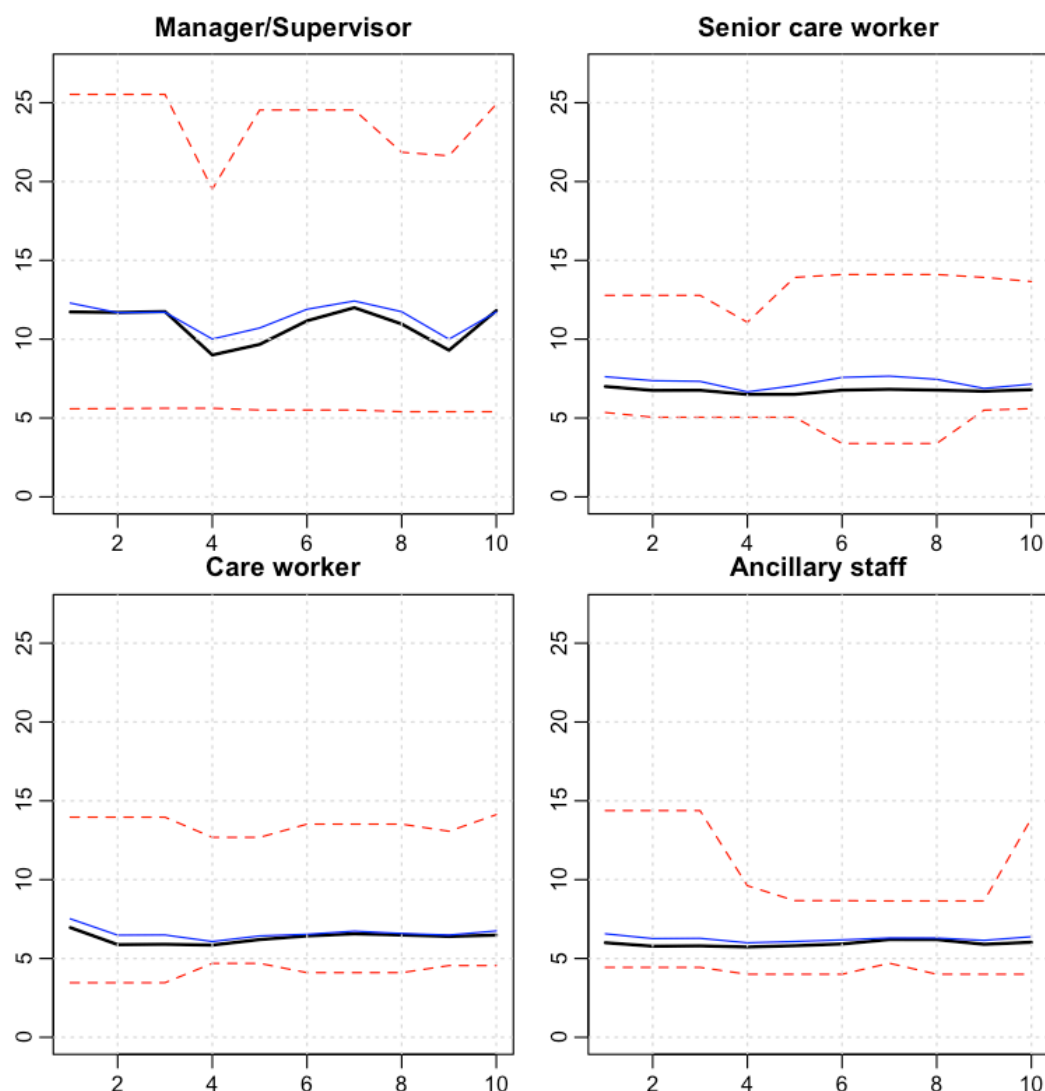
We use the NMDS-SC to examine pay trends during rolling quartiles of 2009 for different job roles in three main English regions: North, Midlands and South.³ We focus on the same job roles used in Figure 1: namely, those performing any managerial/supervisory roles; senior care workers; care workers; and ancillary staff. Hourly pay rate statistics for the three regions for each of the job roles are presented in Tables 7 to 9 and presented graphically using box-plots in Figures 2 to 4.

The regional pay analysis reveals only few differences the levels and trends of pay for each different job role. Among managerial/supervisory roles, the South regions saw a decline from the first to the last quarter of 2009. While in the North and Midlands regions there appeared to be a down curve during the year, however, average pay rates increases again during the last two quarters of 2009. Trend analysis also shows that variability in median hourly pay rate among manager/supervisor roles is lowest in the Midlands region in comparison to both other regions.

Overall the levels of pay for senior care workers and care workers are not notably different by region. Median hourly pay rates for senior care workers fluctuated from £6.70 to £7.10 during 2009 in the Midlands region, compared to £6.90 to £7.11 in the South region. However, ancillary staff median hourly rates were notably different in the Midlands' region. Local demographics may affect both the supply and demand for jobs; there might be fewer job opportunities, particularly for less qualified workers, and of course this has a direct impact on wages.

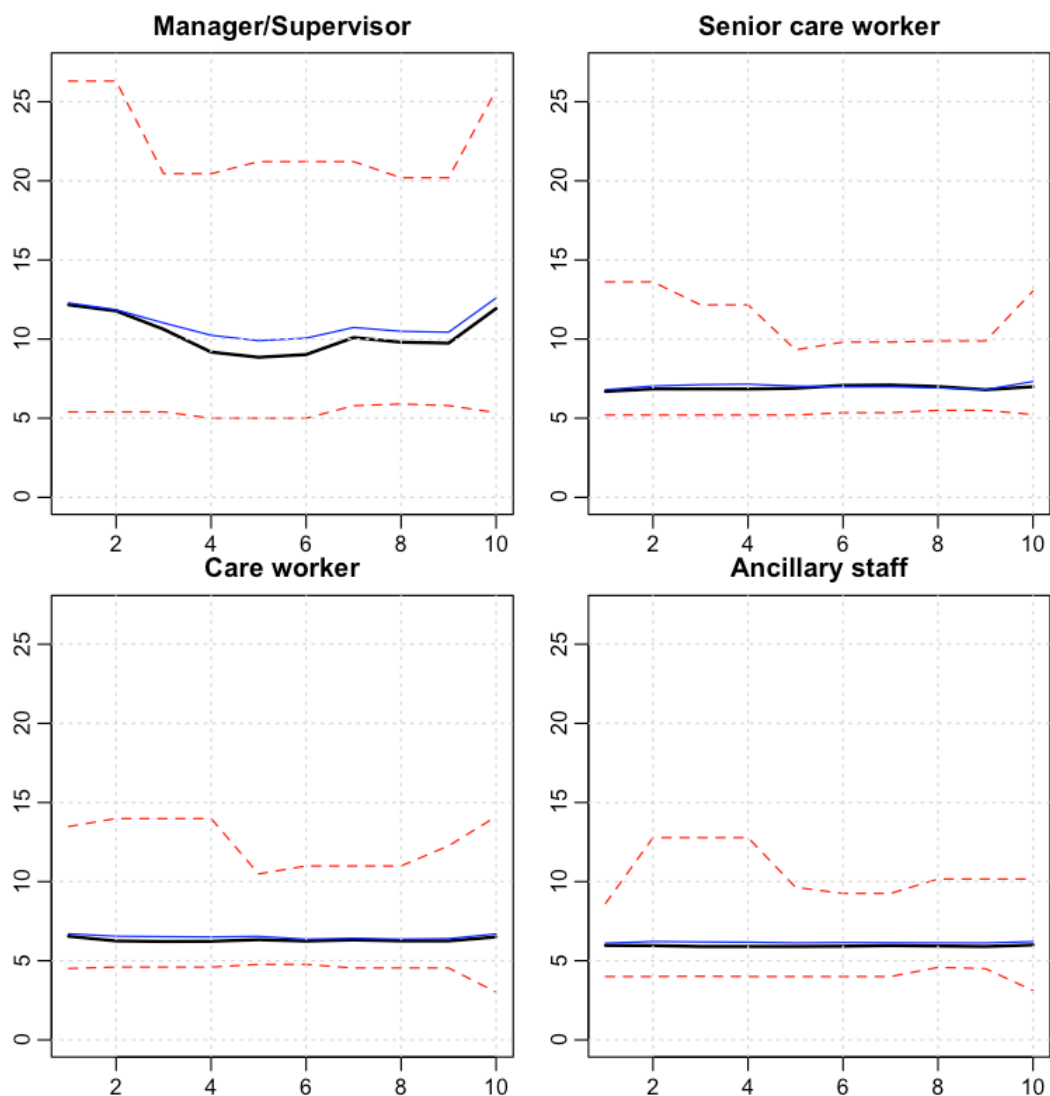
³ Region is recoded to 'North': North, North West, North East and Yorkshire and Humberside; 'Midlands': East Midlands and West Midlands; and 'South': London, South East and South West.

Figure 2 Rolling median, and other statistics, of hourly pay rates for managers/supervisors, senior care workers, care workers and ancillary staff in adult care sector in the 'North' region of England, NMDS-SC Dec 2009



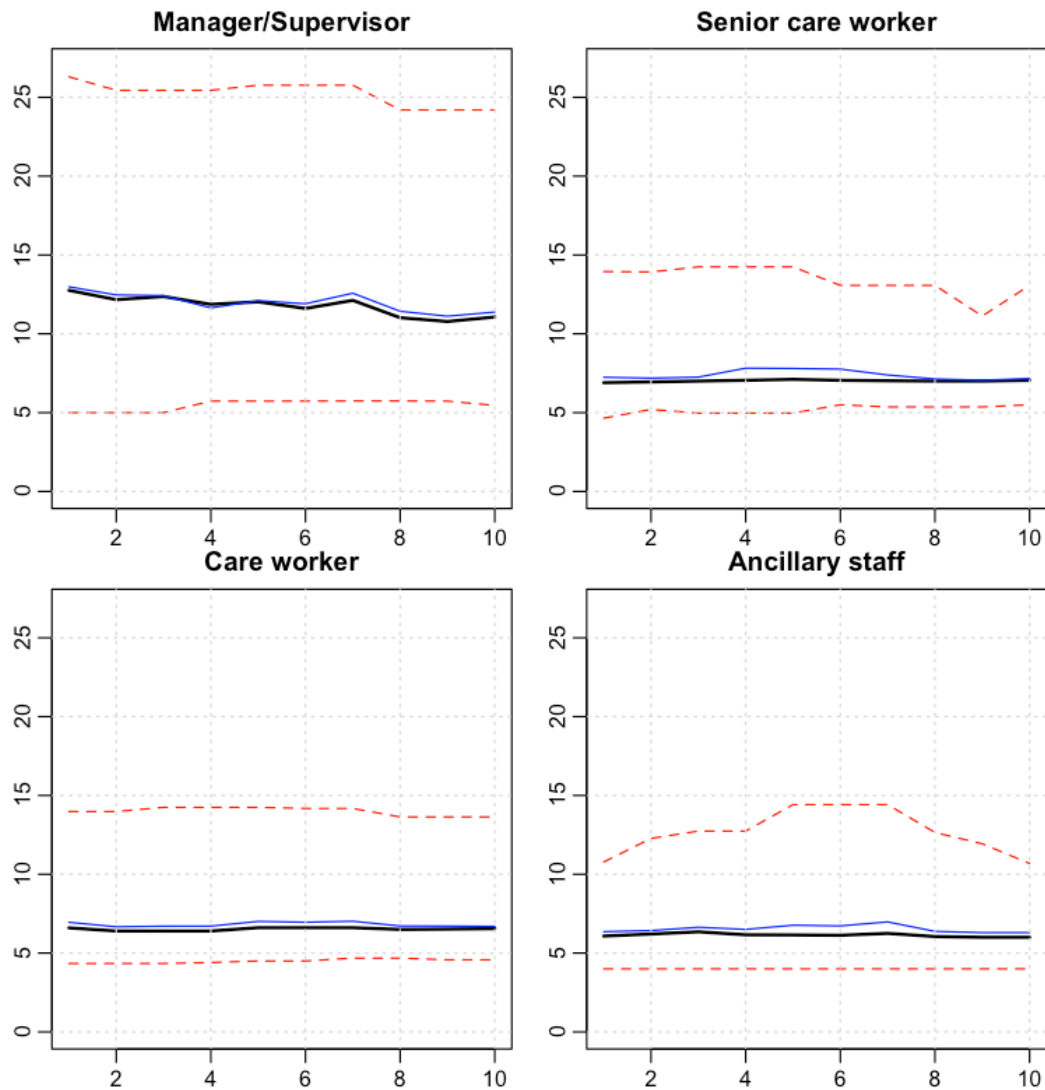
For care workers the median hourly pay rate was also slightly lower in the Midland region. However, this was more stable during 2009 than in other regions: in fact, a minor increase was observed. As observed above for the overall pay levels in England (Figure 1), the pay rate for ancillary staff is slightly, but not dramatically, lower than that of care workers in the three regions of England. However, this gap closed at around 50p difference during the last quarter of 2009 in both the Midlands and South regions.

Figure 3 Rolling median, and other statistics, of hourly pay rates for managers/supervisors, senior care workers, care workers and ancillary staff in the adult care sector in the 'Midlands' region of England, NMDS-SC Dec 2009



Regional pay analysis reflects minor variations particularly in relation to manager/supervisor and ancillary staff pay. This may reflect the overall economic positions of the three broad regions of England and local labour dynamics.

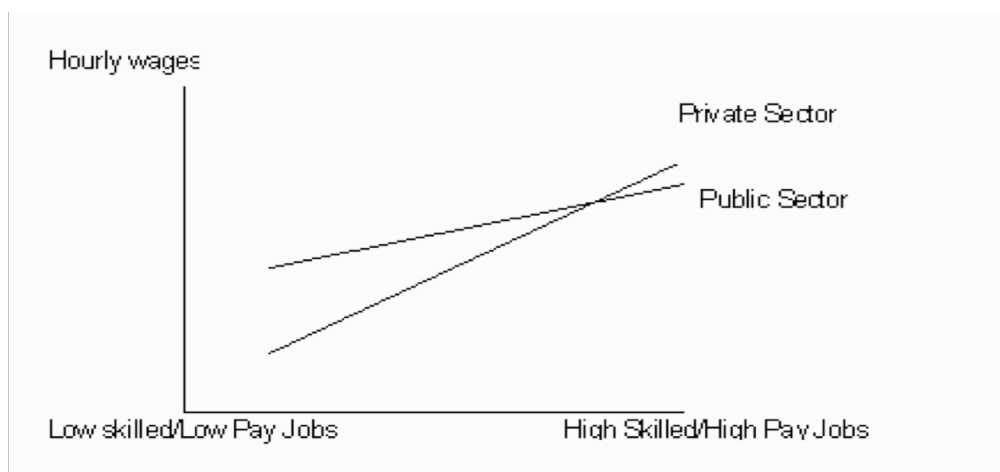
Figure 4 Rolling median, and other statistics, of hourly pay rates for managers/supervisors, senior care workers, care workers and ancillary staff in the adult care sector in the 'South' region of England, NMDS-SC Dec 2009



Sector and pay

Public-private wage differences have gained the attention of many economists and researchers in the past few decades. Generally, there are a number of differences in the set of rules concerning employment and pay terms and conditions across the public and private sectors. These differences range from the process and criteria used for recruitment and promotion to wage profiles and, of course, the role of different trade unions. In the UK, as in most developed countries, the degree of regulation in the private sector is generally lower than that in the public sector (OECD, 2000). In the UK, as in France and Italy, Lucifora and Meurs (2004) calculate more favourable pay rewards among public sector low-skilled workers as compared to the private sector, while the opposite was true for highly skilled workers. However, they also show that a significant part of the variation (60% on average) is explained by worker characteristics such as age and gender. The overall relationship between private-public wage gap and skills level can be sketched⁴ as presented in Picture 1.

Picture 1 Direction of expected relation between private-public wages and skills level

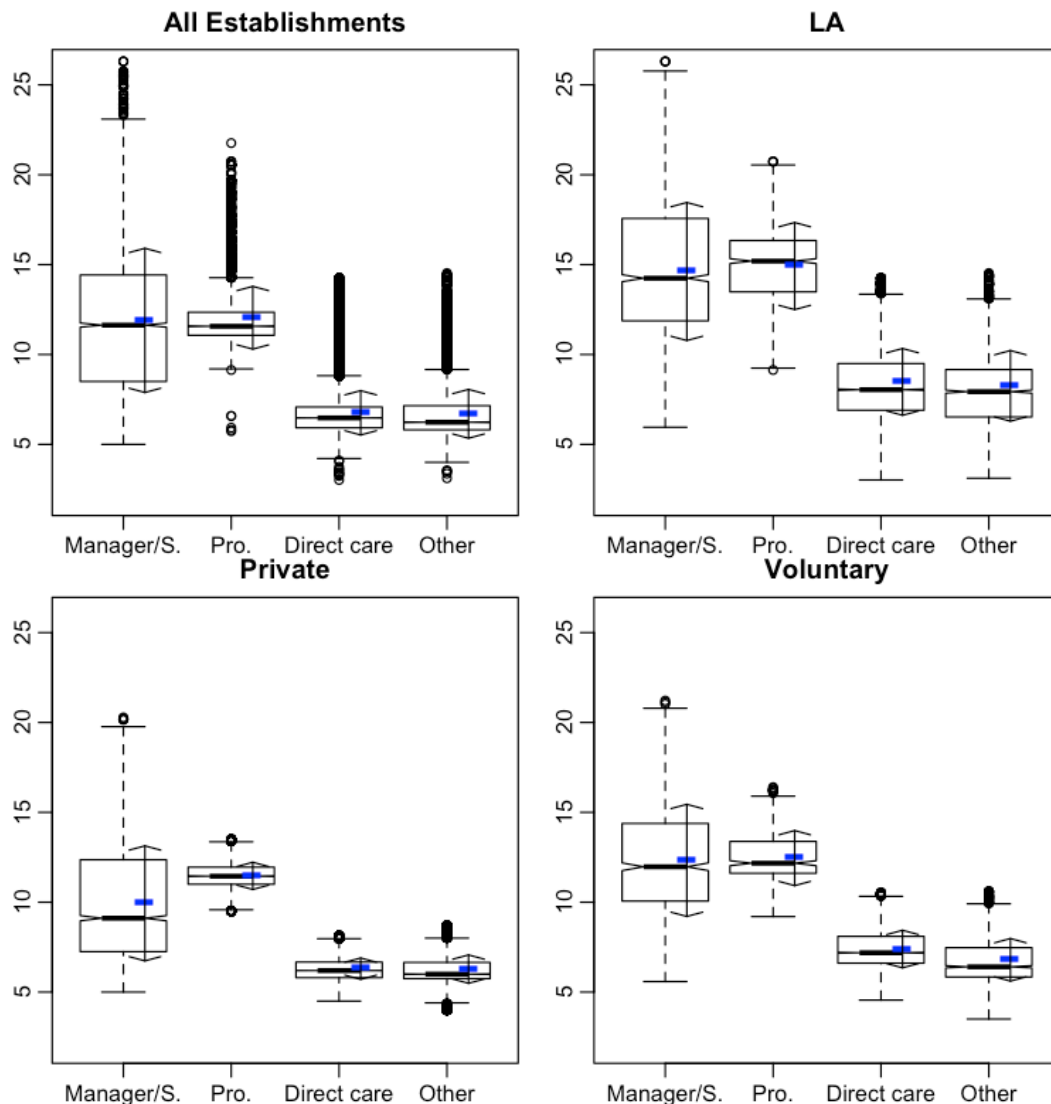


In the adult care sector in England it is estimated that the independent sector (voluntary and private) employs 70 percent of the care workforce (Eborall and Griffiths, 2008). Figure 5 and Table 10 present hourly pay statistics for different job role groups among local authorities (or local authority owned providers; referred as local authority) and the private and voluntary sector, as calculated using the NMDS-SC. Figure 5 presents box plots of pay statistics with mean and standard deviations identified; notches can be used to establish whether variations are significant.⁵

⁴ Adopted from Lucifora and Meurs (2004).

⁵ The middle (or waist) of each box indicates the median hourly pay rate; the top of the box is the 3rd quartile while the bottom of the box is the 1st quartile of hourly pay rate distribution. The 'blue dash' represents mean hourly pay rate while the 'arrow' represents +/- of standard deviation of the distribution. The statistical significance of the variations in median hourly pay rate can be explored graphically using Tukey's notches method. The notches are drawn as a

Figure 5 Box-plots of hourly pay rate statistics for different job groups working in different sectors, NMDS-SC Dec 2009



Notes: LA: Local authorities; Manager/S.: Manager/supervisor; Pro: Professional

On average, pay rates are highest among local authorities. For example, managers/supervisors receive the highest median hourly rate if they are working in local authorities, with a median hourly rate of £14.24, followed by those working the voluntary sector with a median hourly rate of £11.97; the rate is lowest within the private sector at £9.11. Similarly, the direct care median hourly rate drops from £8.10 among those working in local authorities to £6.00 for those working in the private sector. For all job roles, the median hourly pay in the voluntary sector is also higher than that in the private sector, particularly among managers/supervisors. The Low Pay Commission (2009) analysis highlighted that being paid at or below minimum wages is more prevalent in the private sector in the UK. This is clearly indicated in the current findings in

'waist' on either side of the median and are intended to give a rough impression of the significance of the differences between two medians. Boxes in which the notches do not overlap are likely to have significantly different medians (Rousseeuw and Ruts, 1998).

relation to the adult social care sector, particularly among managerial/supervisory roles.

The box-plot presented in Figure 5, however, shows some interesting information in terms of the pay distributions among different sectors, particularly when comparing local authorities and the private sector. The pay distribution for professional staff in local authorities is much wider than that observed in the private sector, and, to some extent the voluntary sector. The same graph also identifies that median hourly pay is significantly higher among professional staff in all sectors when compared to manager/supervisors, except the voluntary sector where the differences are not significant.

Table 7 Hourly pay rate statistics for different job groups working in different sectors, NMDS-SC Dec 2009

Sector and main job role group	Number of workers	Hourly pay rate		
		Median	Mean	SD
Local authorities‡				
Manager/Supervisor	2121	14.24	14.62	3.84
Professional	1089	15.20	14.92	2.42
Direct Care	11675	8.04	8.48	1.86
Other	2388	7.93	8.25	1.97
Private sector				
Manager/Supervisor	3075	9.11	9.94	3.20
Professional	6227	11.45	11.47	0.76
Direct Care	57632	6.20	6.30	0.59
Other	9477	6.00	6.28	0.79
Voluntary sector				
Manager/Supervisor	1019	11.97	12.33	3.12
Professional	400	12.17	12.45	1.53
Direct Care	9695	7.19	7.39	1.04
Other	1662	6.41	6.80	1.18

‡ Including local authority owned

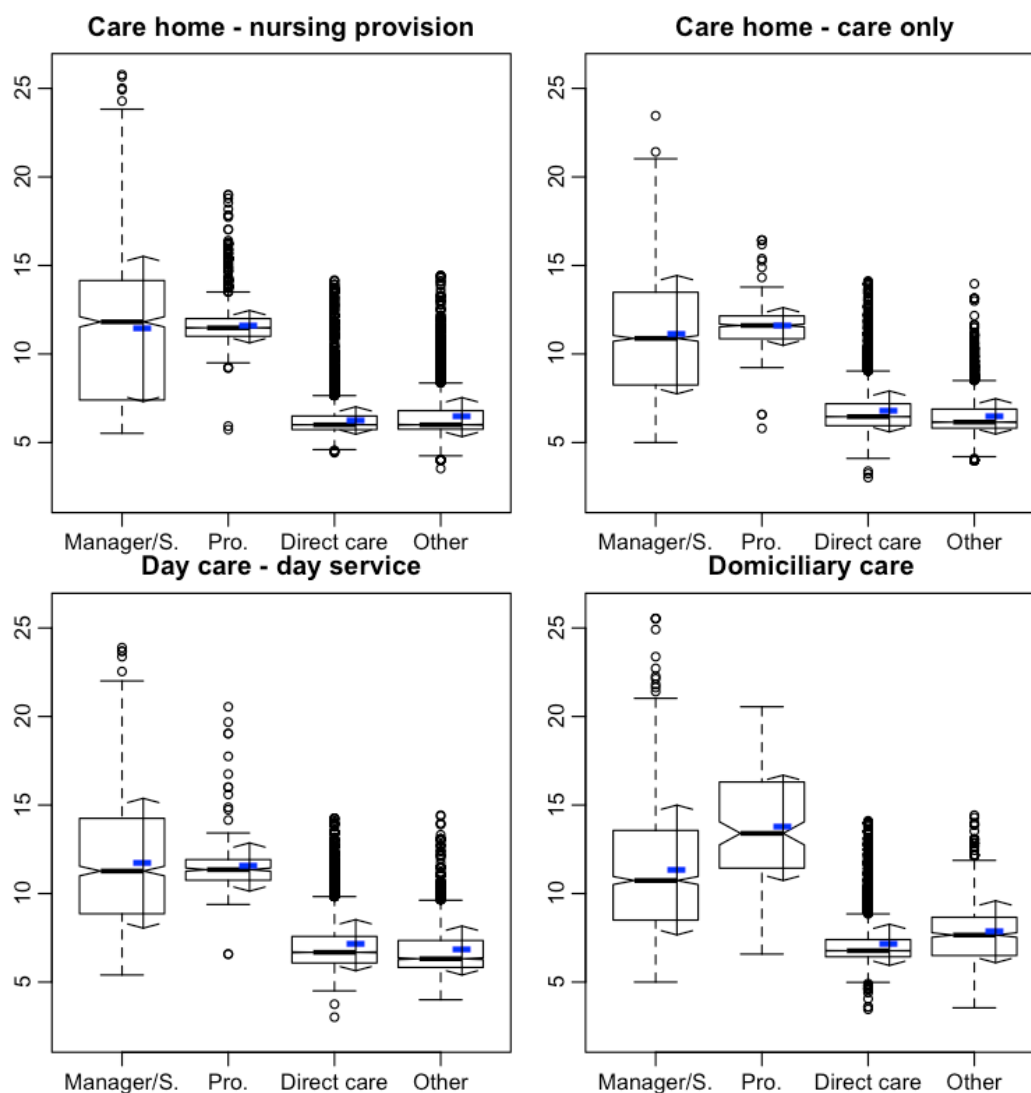
Type of setting and pay

In 2007, 68 percent of care homes registered with the Commission for Social Care Inspection (CSCI) were privately owned and 22 percent were held within the voluntary sector (the rest were local authority owned). Care homes with nursing, as well as domiciliary care agencies, were more private sector dominated, at 89 percent and 74 percent respectively (Eborall and Griffiths, 2008). On the other hand, the majority of day care centres were operated by councils (local authorities). The NMDS-SC contains information on the type of settings where workers mainly worked; here we identify and focus on pay levels in four of these settings; namely care homes with nursing provision; care homes without nursing provision (care only); day care and day services; and domiciliary care (home care). Table 8 and Figure 6 present pay statistics for different job role groups within each of these settings.

Table 8 Hourly pay rate statistics for different job role groups in different work settings, NMDS-SC Dec 2009

Type of setting and main job role group	Number of workers	Hourly pay rate		
		Median	Mean	SD
Care home with nursing provision				
Manager/Supervisor	1330	11.82	11.41	4.10
Professional	6627	11.48	11.54	0.92
Direct Care	30447	6.00	6.24	0.78
Other	6386	6.00	6.43	1.11
Care home - care only				
Manager/Supervisor	2625	10.88	11.09	3.34
Professional	658	11.61	11.55	1.07
Direct Care	26245	6.46	6.76	1.16
Other	6472	6.15	6.48	1.00
Day care - day service				
Manager/Supervisor	979	11.27	11.71	3.67
Professional	407	11.35	11.5	1.36
Direct Care	9015	6.68	7.08	1.44
Other	2227	6.32	6.78	1.38
Domiciliary care				
Manager/Supervisor	1248	10.74	11.33	3.67
Professional	138	13.40	13.71	2.97
Direct Care	21501	6.77	7.11	1.17
Other	722	7.66	7.84	1.75

Figure 6 Box-plots of hourly pay rates' statistics for different groups of job roles within different work settings, NMDS-SC Dec 2009



Several differences in pay rate by setting can be read from Figure 6 and Table 8. First, managers'/supervisors' median hourly rate is nearly the same across all settings, though perhaps slightly lower among those working in care home without nursing provision. Secondly, the median hourly pay rate for professional job roles is highest in domiciliary care settings, at £13.40 compared to a range of £11.35 to £11.88 in the other three settings. Third, direct care workers earn least in care homes with nursing provision, at £6.00 per hour; their wages are highest in domiciliary care at £6.77 per hour on average. Fourth, 'other' workers (including administrative, ancillary and other work not involving care providing) earn higher, on average, than direct care workers when considering domiciliary care settings (median hourly rate is £7.66 vs. £6.77 respectively). The very narrow gap between direct care workers' pay and 'other workers', and the fact that domiciliary direct care workers earn significantly less than other workers in

the same setting, calls for attention, given the higher level of requirements and regulations applied to the former group.

Pay statistics presented in Table 8 also show that hourly pay rates among managers/supervisors have a broad range and can vary particularly if working in care homes with nursing provision (with $SD=4.10$). While variations in hourly pay rates are relatively low among direct care workers, which means that most direct care workers earn roughly the same amount.

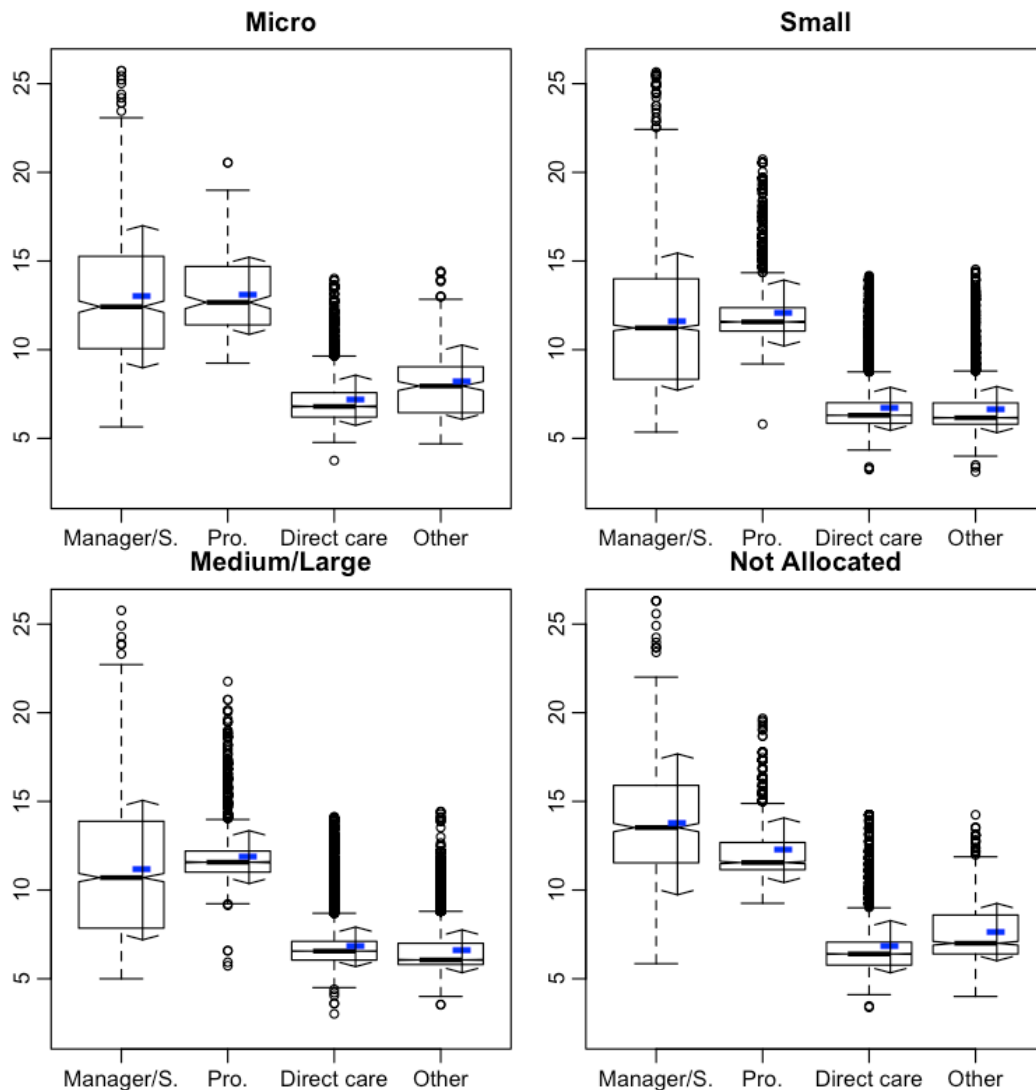
Establishment size and pay

Establishment, or firm, size is associated with average wage in many countries, with wages generally higher in large firms (Idson and Oi, 1999; Lallemand et al., 2007). However, many argue that there is a logical construction linking firm size and high wages, with some explanatory theories such as the different selection process for employees who may be able to join a larger establishment as a starting point. A confounding effect of such observations usually relates to the skills matrix of large and small firms, with the former usually characterised by staff with higher skills levels.

However, in relation to the specific area of the adult care sector, the direction of the association between establishment size and pay rate may not follow any expected pattern. This is mainly to do with the characteristics of care providers as well as the nature of care work and average skills of workers. In England, most care services are provided by micro (1-9 staff members) and small (10-49) enterprises. Only 13 percent of establishments providing adult social care in England are medium or large firms (Eborall and Griffiths, 2008). The other important issue is the core of this argument, which relates to the skills matrix of staff and whether those with higher skills are attracted to or sought by larger employers. The position of the care sector in the labour market and its wide skill composition, which is skewed towards the unskilled end, make hypothesising any relationships between establishment size and pay within the care sector even harder.

Using NMDS-SC pay data we aim to explore whether there is a relationship between pay and establishment size, while controlling for broad job roles performed. Figure 7 and Table 9 present pay statistics for different job role groups within different adult care providers with different staff sizes.

Figure 7 box-plot of hourly pay statistics for different job role groups in different establishment sizes, NMD-SC Dec 2009



Micro: 1-9 staff members; Small: 10-49 staff member; Medium/large: 50 or more staff members; not allocated: not allocated a size by SfC

The pay analysis shows that overall, workers earn more on average when working with micro providers (those with less than 10 staff members). Another important finding from this analysis reflects the median hourly pay for professional staff is not significantly different from that among managers/supervisors in micro firms. In both small and medium to large firms, professional staff's hourly pay rates are significantly, but not largely, higher than managers'/supervisors' hourly rate (£11.57 vs. £11.23 and £11.57 vs. £10.70 respectively). Such observed variations in pay rates among micro employers are very relevant to personalization, and the anticipated growth of services such as brokers and advocates. Skills for Care is currently in the process of facilitating returns from users who employ their own direct care workers, through adopting a smaller version of the NMD-SC and other measures.

Table 9 Hourly pay statistics for different job role groups in different establishment sizes, NMD-SC Dec 2009

Establishment size and main job role group		Number of workers	Hourly pay rate		
			Median	Mean	SD
Micro					
	Manager/Supervisor	652	12.42	12.99	4.01
	Professional	212	12.67	13.04	2.18
	Direct Care	3874	6.80	7.15	1.42
	Other	263	7.95	8.17	2.10
Small					
	Manager/Supervisor	3211	11.23	11.58	3.87
	Professional	3242	11.57	12.07	1.86
	Direct Care	36662	6.30	6.67	1.22
	Other	7114	6.16	6.62	1.30
Medium/Large					
	Manager/Supervisor	1644	10.70	11.13	3.93
	Professional	3058	11.57	11.86	1.49
	Direct Care	29791	6.56	6.80	1.12
	Other	5549	6.06	6.55	1.21
Size not allocated					
	Manager/Supervisor	865	13.52	13.71	3.97
	Professional	1401	11.55	12.25	1.83
	Direct Care	10114	6.40	6.81	1.47
	Other	1093	7.00	7.63	1.62

Personal Characteristics and pay

Pay and Gender

Many researchers argue that gender differences in labour market participation change in a complex fashion. For example, some observe that in most developed countries, while women may have gained greater access to employment they are still disadvantaged in the quality of new jobs obtained and in their wages when compared to men. A number of recent research studies show that gender wage-gaps are still very wide in many developed countries (World Bank, 2001); however such gaps are not necessarily a reflection of an educational and skills gap but also a reflection of the overall wage structure as well as occupational concentration patterns. For example, it is expected that gender wage-gap will increase if women become proportionally more represented in low paid jobs (Blau and Kahn, 2003; Olivetti and Petrongolo, 2006).

This section investigates whether gender pay-gaps exist among workers who perform the same main job roles within the care sector. In the UK, the Low Pay Commission (2009), using the Annual Survey of Hours of Earning (ASHE), found that the prevalence of being at or below the minimum wage is significantly higher for women, particularly those in part time jobs.

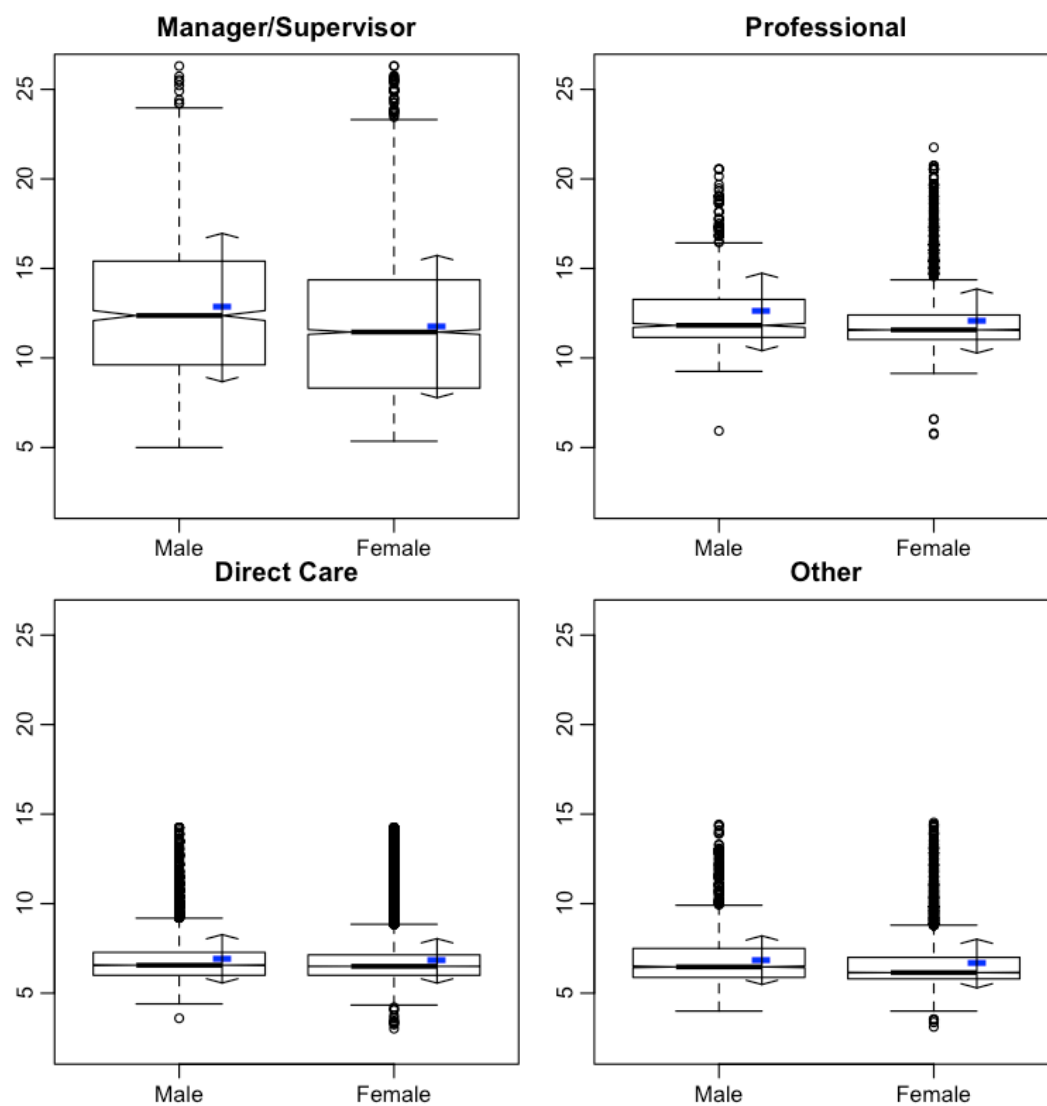
Table 10 Hourly pay rate statistics for men and women with different main job role groups, NMDS-SC, Dec 2009

Main job role and gender	Number of workers	Hourly pay rate		
		Median	Mean	SD
Manager/supervisor				
Male	1060	12.37	12.82	4.14
Female	5152	11.45	11.75	3.97
Professional				
Male	901	11.82	12.57	2.16
Female	5844	11.57	12.06	1.79
Direct Care				
Male	9771	6.56	6.92	1.35
Female	64250	6.50	6.81	1.24
Other				
Male	2977	6.47	6.84	1.36
Female	10844	6.15	6.66	1.36

Pay statistics presented in Figure 8 and Table 10 show that the gender pay-gap is observed among more qualified groups of workers; mainly those with manager/supervisor and professional roles, while no significant gender pay-gap is observed among less qualified workers; namely direct care and other workers. On average men working in manager/supervisor roles earn around £1 per hour more than women doing the same jobs. However, within direct care women's median hourly pay rate is almost identical to men's, at around £6.50, and very

small variations in the median hourly pay rate are observed for ancillary jobs (£6.15 vs. £6.47).

Figure 8 Box-plots of hourly pay rate statistics for men and women with different main job role groups, NMDS-SC Dec 2009



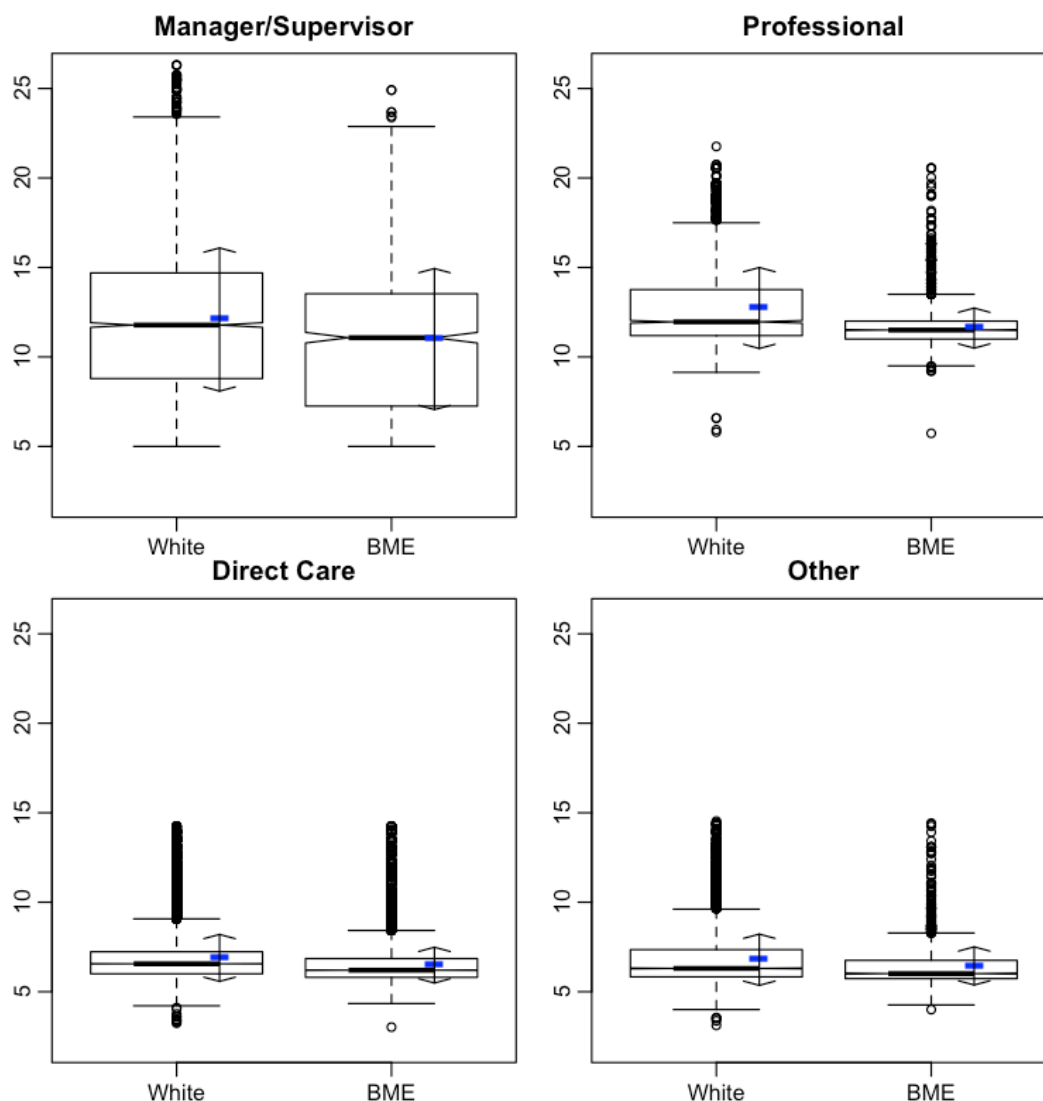
Pay and ethnicity

Race and ethnicity also play an important role in employment options as well as choices. Evidence strongly suggests that an ethnic pay-gap exists in the UK: for example, the Low Pay Commission (2009), using Labour Force Survey data, found that 8 percent of people identified as being from Black and Minority Ethnic groups (BME) receive wages at the NMW or below, compared to 6 percent of White employees. These anomalies can, of course, be related to the type of jobs undertaken by each of these groups and it is well documented that BME workers are more concentrated in low pay jobs in general (Datta, 2008). To examine such assumptions further we aim to compare pay statistics among workers who are doing the same main job role groups by ethnicity; this will allow us to compare groups who are 'expected' to earn similar wages, on average, since they are doing the same job roles. These pay statistics are presented in Figure 9 and Table 11.

Table 11 Hourly pay rate statistics among White and BME workers with different main job role groups, NMDS-SC Dec 2009

Main job role group and ethnicity		Number of workers	Hourly pay rate		
			Median	Mean	SD
Manager/Supervisor	White	5256	11.78	12.09	4.00
	BME	1116	11.07	11.00	3.94
Professional	White	3059	11.96	12.73	2.26
	BME	4854	11.50	11.61	1.12
Direct care	White	54232	6.56	6.89	1.31
	BME	26209	6.20	6.48	1.00
Other	White	10576	6.30	6.79	1.43
	BME	3443	6.01	6.44	1.06

Figure 9 Box-plots of hourly pay rate statistics for White and BME workers with different main job role groups, NMDS-SC Dec 2009



the box plots and pay statistics by ethnicity shows that, unlike gender, some small but significant ethnic pay gaps exist among 'all' job roles, with the widest pay-gap among managers/supervisors. Figure 9 also shows that the highest quartile of pay (3rd) is considerably higher among White professionals than that among BME workers (£17 vs. £14). It is perhaps surprising to find these variations which may relate to a wider promotional and career progression opportunities.

Discussion and Conclusion

It is important to reinforce the strengths and weaknesses of the NMDS-SC, as discussed in previous Issues of *Social Care Workforce Periodical*. On the one hand, the NMDS-SC is the most detailed database on the adult social care workforce in England to date; however, due to its evolving nature and methodology of data collection, there are a number of limitations. First, the focus of the data is on adult social care. Secondly, the current NMDS-SC over-represents workers from the independent sector and under-represents workers in the statutory sector. The progressive nature of NMDS-SC completion is another point: however, it is expected that in the near future, larger proportions of employers will complete the dataset, improving the coverage and representativeness of the data. The nature and methods of data collection are other important elements, since employers provide all data on individual workers, and therefore there is a consideration regarding accuracy. In particular, there are a number of variables, such as disability and qualifications, where missing values are high. Lastly, the NMDS-SC is not currently completed by individual employers (those in receipt of direct payments or self-funders, for example) and therefore under-represents 'micro' employers. Nevertheless, the current data set provides a unique source of rich information and the analyses offer important, albeit partial, indicators and insight into the adult social care workforce pay levels and trends in England.

The pay analysis presented in this Issue provides a unique insight into up-to-date information on pay levels and recent trends for workers in the English adult care sector. The analysis shows that in adult social care in England the median hourly pay rate for managers/supervisors is £11.63, very close to that of professional staff (mainly social workers, nurses and occupational therapists) at £11.57 per hour. Less qualified staff's median hourly pay rate is much lower, with direct care workers (including senior care workers) receiving on average £6.47 per hour, which is almost the same as the £6.23 median hourly rate of other workers (including ancillary non-care providing staff). The findings suggest the presence of a double-layered workforce, encompassing a minority (18%) of professionals and staff in managerial roles who are paid well above the majority of direct care workers and workers in other roles. This reflects, to some extent, differences in skills, qualifications and experiences between the two groups. Trends of pay analysis indicates a slight decline in hourly pay rates among managers/supervisors during 2009, possibly reflecting the recession and general economic climate of England during this period. However, this decline was more noticeable in the South of England, where pay rates are slightly higher than in the North and Midlands regions of England. There was not other notable regional variations, except for ancillary staff where their pay was lowest in the Midlands region.

Analysis of pay statistics for different job role groups by sector shows that, in general, median pay rates are better in local authorities or local authority owned

provision, particularly for managers/supervisors. This is true for other groups of workers, such as direct care workers, where the median hourly rate was £8.14 in local authorities compared to only £6.10 in the private sector. Pay rates were also better in the voluntary sector than the private sector. Another finding is that the distribution of pay among professional workers is much wider in local authorities than in the private sector, indicating that professional hourly pay rates in the private sector are very similar.

This Issue examined pay variations by type of service in four main settings: care homes with nursing provision; care homes without nursing provision; day care or day services; and domiciliary care services. The analysis shows that median hourly rates for manager/supervisor roles are very similar in the four settings; however, professional pay is considerably higher in domiciliary care settings. One important finding is that direct care staff earn on average less than workers engaged in non-care providing jobs (mainly ancillary: cleaners, cooks and drivers) in domiciliary care settings (£6.77 vs. £7.66). A volume of literature exists aiming to link wage levels and firm or establishment size, with a tendency to indicate that workers in larger establishments appear to earn higher wages. However, NMDS-SC data indicate that, in the adult social care sector in England, workers earn more on average when working with micro providers (those with less than 10 staff members). Pay data analysis indicates a gender wage-gap at the high skill end; however, no significant differences are observed at the low skill end. Men who perform managerial, supervisory or professional jobs gain significantly higher pay than women who do the same jobs; with the difference in median hourly rate being above a pound per hour. On the other hand, less skilled workers appear to receive similar, low, pay. Another pay-gap is observed in relation to ethnicity.

The analysis presented in this Issue of *Social Care Workforce Periodical* provides much needed insight into pay levels and variations in pay by a number of organisational and personal factors in the adult care sector in England. Some of these factors are hierarchical: for example, employers' characteristics may play an important role in pay levels as well as in the characteristics of workers engaged by such employers. Other personal factors may interact with each other as well as with pay; for example, Issue 5 showed that age and ethnicity are significantly associated and each of them may interact with pay. The current analyses show that employers level factors such as sector, settings and significantly affect pay levels for different staff groups. Some variations were also observed in relation to workers personal characteristics as well. To gain a better understanding of these interactions and hierarchical effects, the next Issue (7) of *SCWP* is dedicated to examining hourly pay rates by different organisational and personal characteristics through the use of mixed-effects (or hierarchical) statistical modelling techniques.

References

- Anderson, N. and Hughes, D. (2009). The Business of Caring: Women's Self-Employment and the Marketization of Care, *Gender Work and Organization*, Advance Access, 2009, doi:10.1111/j.1468-0432.2009.00461.x.
- Blau, F.D. and Kahn, L.M. (2003). Understanding International Differences in the Gender Pay Gap. *Journal of Labor Economics*, 21(1): 106–44.
- CBI (2009). *Employment trends 2009: Work patterns in the recession*. London: CBI, the Voice of Business.
- Dickens, R. and Manning, A. (2002). *Spikes and spillovers: the impact of the national on the wage distribution in a low wage sector*, mimeo, CEP, LSE, (December).
- Doran, T., Drever, F. and Whitehead, M. (2006). Health underachievement and overachievement in English local authorities. *Journal Epidemiological Community Health*, 60: 686-693.
- Eborall, C. and Griffiths, D. (2008). *The State of the Adult Social Care Workforce in England 2008. The Third Report of Skills for Care's Skills Research and Intelligence Unit*. Leeds: Skills for Care.
- England, P., Budig, M. and Folbre, N. (2002). Wages of Virtue: The Relative Pay of Care Work. *Social Problems*, 49(4): 455-473.
- Hussein, S. (2009a). The size, roles and stability of the social care workforce in England. *Social Care Workforce Periodical*, Issue 1- August 2009; web published <http://www.kcl.ac.uk/content/1/c6/06/18/41/SCWPissue1FINAL.pdf> (accessed 7 April 2010).
- Hussein, S. (2009b). Social care workforce profile: Age, gender and ethnicity. *Social Care Workforce Periodical*, Issue 2 - September 2009; web published <http://www.kcl.ac.uk/content/1/c6/06/89/16/SCWPissue2FINAL.pdf> (accessed 7 April 2010).
- Hussein S., Stevens M. and Manthorpe J. (2010) *International Social Care Workers in England: Profile, Motivations, experiences and Future Expectations*, February 2010. Final Report to the Department of Health, Social Care Workforce Research Unit, King's College. <http://www.kcl.ac.uk/content/1/c6/03/89/16/Husseinetal2010International-FinalReport.pdf>
- Idson, T. and Oi, W. (1999). Firm Size and Wages. In Ashenfelter, O. and Card, D. (eds.) *Handbook of Labor Economics*, Volume 3B. Amsterdam: Elsevier: 2165–2214.

Low Pay Commission (2009). *National Minimum Wage, 2009 report*. <http://www.lowpay.gov.uk/lowpay/report/pdf/7997-BERR-Low%20Pay%20Commission-WEB.pdf> (accessed 5 April 2010).

Lallemand, T., Plasman, R. and Rycx, F. (2007). The Establishment-size Wage Premium: Evidence from European Countries, *Empirica* 34: 427–451.

Lucifora, C. and Meurs, D. (2004). *The Public Sector Pay Gap in France, Great Britain and Italy*. Working paper. Turin: (CHILD) Centre for Household, Income, Labour and Demographic Economics. <http://www.child-centre.it/>

Metcalf, D. (2004). The Impact Of The National Minimum Wage On The Pay Distribution, Employment And Training, *The Economic Journal*, 114: C84-C86.

OECD (2000). *Trends in Public Sector Pay in OECD Countries*. Paris: PUMA.

Olivetti, C., and Petrongolo, B. (2006). *Unequal Pay or Unequal Employment? A Cross-Country Analysis of Gender Gaps*. IZA Discussion Paper 1941. Bonn: Institute for the Study of Labor.

Palmer, E. and Eveline, J. (2010). Sustaining Low Pay in Aged Care Work. *Gender, Work and Organization*, Advance access 2010, doi:10.1111/j.1468-0432.2010.00512.x.

Rousseeuw, P. J., Ruts, I., et al. (1999). The Bagplot: A Bivariate Boxplot, *The American Statistician*, 53(4): 382-387.

World Bank (2001). *Engendering Development through Gender Equality in Rights, Resources, and Voice*. World Bank Policy Research Report. New York: Oxford University Press.

About NMDS-SC

The NMDS-SC is the first attempt to gather standardized workforce information for the social care sector. It is developed, run and supported by Skills for Care and aims to gather a 'minimum' set of information about services and staff across all service user groups and sectors within the social care sector in England. The NMDS-SC was launched in October 2005, and the online version in July 2007; since then there has been a remarkable increase in the number of employers completing the national dataset.

Two data sets are collected from employers. The first gives information on the establishment and service(s) provided as well as total numbers of staff working in different job roles. The second data set is also completed by employers; however, it collects information about individual staff members. Skills for Care recommends that employers advise their staff they will be providing data through the completion of the NMDS-SC questionnaires. No written consent from individual members of staff is required, however, ethnicity and disability are considered under the Data Protection Act to be '*sensitive personal data*', thus it is recommended that consent for passing on these two items needs to be explicit. For further details on NMDS-SC please visit <http://www.nmds-sc-online.org.uk/>

The NMDS-SC has provided the sector with a unique data set, providing information on a number of the workforce characteristics. However, it is important to highlight the emerging nature of the NMDS-SC, mainly due to the fact that data have not been completed by '*all*' adult social care employers in England, at this stage. Therefore, some of the findings may be under- or over-represented as a result of this. It is also equally important to bear in mind that data are completed by employers and not workers. This may also prompt some technical considerations when interpreting the findings. *Social Care Workforce Periodical* will address such considerations in relevant discussions of findings.